



Employee License Renewal Application

Arkansas Racing Commission Electronic Games of Skill Section

www.Arkansas.gov/dfa/racing

For Calendar Year 2010

Current Arkansas License Expiration Date: _____

Arkansas Gaming License #: _____

Instructions: Application for Renewal MUST be submitted to the Electronic Games of Skill Section three (3) months prior to the expiration date of the current license. The renewal fee for an employee license is \$ 25. Payment may be made by check or money order (NO CASH) payable to: Arkansas Racing Commission. **All application fees are non-refundable.**

Please read and complete every section. If a section does not apply, enter not applicable (n/a). Print clearly in black or blue ink. Send or deliver the ORIGINAL and ONE (1) copy of the COMPLETED FORM and RELEASE AUTHORIZATION to the appropriate address shown below:

Manufacturer/Distributor/Service Industry Employees

Susan Day
C/O Electronic Games of Skill Section
1816 West 7th St., Room 1310
Little Rock, AR 72203

Oaklawn Employees

Jan Townsend
C/O Electronic Games of Skill Section
2705 Central
Hot Springs, AR 71902

Southland Employees

Jimmy Swafford
C/O Electronic Games of Skill Section
1550 N Ingram Blvd
West Memphis, AR 72303

TO BE COMPLETED BY ALL APPLICANTS

Social Security Number:

Birth Date
(MM/DD/YY)

Gender:

_____ Male _____ Female

Last Name:

First:

Middle:

Title:

Suffix:

Change of Name (Name as Listed on the Original License):

Reason for Change of Name: _____ MARRIAGE _____ DIVORCE _____ COURT ORDER _____ OTHER

Current Street Address:

City:

State:

Zip Code

Country:

Home Telephone Number:

Work Telephone Number:

Current Mailing Address:

City:

State:

Zip Code

Country:

Facility where employed and/or doing business (check all that apply):

_____ Southland

_____ Oaklawn

Current License Type (check one): _____ Key Employee _____ General Employee _____ Mfg/Distributor/Service Industry

If you are employed at any other gaming facility besides the businesses listed above, please list the facility name below:

Name of Business:

Street Address:

City, State & Zip:

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Are you currently employed in any non-gaming position at a different employer than the ones mentioned above?
Yes____ No____ If yes, complete the following:

<u>Name of Business:</u>	<u>Street Address</u>	<u>City, State & Zip</u>	<u>Supervisor's Name</u>
_____	_____	_____	_____
_____	_____	_____	_____

Have you been reprimanded, suspended, terminated by this employer since you were initially licensed or since the time of your last license renewal? Yes____ No____ If yes, complete the following:

<u>Name/Address of Employer</u>	<u>Nature of Action</u>	<u>Reason</u>	<u>Date</u>
_____	_____	_____	_____
_____	_____	_____	_____

Have you had any license, work permit, or certificate to work in the gaming industry suspended, revoked, denied, or had any disciplinary action taken concerning it, in Arkansas or any other state or jurisdiction since you were initially licensed or your last license renewal? Yes____ No____ If yes, complete the following:

<u>Nature of Action</u>	<u>Type of License, Permit or Certificate</u>	<u>Government Agency Involved</u>	<u>Date of Action</u>	<u>Reason for Action</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

For the purpose of this question, the word "arrest" includes any taking into custody by any police or other law enforcement authorities to answer for the alleged performance of any "offense." The word "charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense." The word "offense" includes all felonies, and misdemeanors, and violations of probation or any other court order.

NOTE: YOU NEED NOT DISCLOSE ANY ARREST OR CHARGE WHICH HAS BEEN THE SUBJECT OF A LAWFUL COURT ORDER OF EXPUNGEMENT OR SEALING IF SUCH ORDER ENTITLES YOU TO ANSWER "NO" TO SUCH AND YOU ATTACH A COPY OF THE EXPUNGEMENT OR SEALING ORDER.

Have you been arrested or charged, even if not convicted, with any crime or offense in any jurisdiction since you were initially licensed or since the time of your last renewal? Yes____ No____ If yes, complete the following:

<u>Nature of Charge or Offense</u>	<u>Name and Address of Law Enforcement Agency or Court Involved</u>	<u>Date of Charge</u>	<u>Disposition</u>
_____	_____	_____	_____
_____	_____	_____	_____

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TO BE COMPLETED BY KEY EMPLOYEES ONLY

Have you been sued or named as a defendant or respondent since you were initially licensed or since your last license renewal or have you had any financial liens or judgments filed against you since you were initially licensed or since the time of your last renewal? Yes ___ No ___ If yes, complete the following:

Type of Action

Filed By

Date Filed

Reason

ALL APPLICANTS - COMPLETE THE SECTION BELOW AFTER ALL QUESTIONS HAVE BEEN ANSWERED

This affidavit must be signed by you in the presence of a notary public and your signature notarized, or in the presence of and Electronic Games of Skill Official

I swear (or affirm) that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to having my gaming license revoked.

Sworn and subscribed to before me
this _____ day of _____
Applicant

Applicant: _____
(Legal Signature of

Notary Public or Gaming Official

Date: _____